

20-613808



Secretary of State
Statement of Information
 (California Nonprofit, Credit Union and
 General Cooperative Corporations)

SI-100

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IMPORTANT — Read instructions before completing this form.

Filing Fee — \$20.00;

Copy Fees — First page \$1.00; each attachment page \$0.50;
 Certification Fee — \$5.00 plus copy fees

FILED
Secretary of State
State of California

JUN 11 2020

This Space For Office Use Only

1. Corporation Name (Enter the exact name of the corporation as it is recorded with the California Secretary of State)

CASWELL CONDOMINIUM ASSOCIATION, INC.

2. 7-Digit Secretary of State File Number

C0867179

3. Business Addresses

a. Street Address of California Principal Office, if any - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
4730 WOODMAN AVE # 200	SHERMAN OAKS	CA	91423
b. Mailing Address of Corporation, if different than item 3a	City (no abbreviations)	State	Zip Code

4. Officers

The Corporation is required to enter the names and addresses of all three of the officers set forth below. An additional title for Chief Executive Officer or Chief Financial Officer may be added; however, the preprinted titles on this form must not be altered.

a. Chief Executive Officer/	First Name	Middle Name	Last Name	Suffix
	SAM		LUTFI	
Address	City (no abbreviations)		State	Zip Code
16030 VENTURA BLVD # 240	ENCINO		CA	91436
b. Secretary	First Name	Middle Name	Last Name	Suffix
	SUNY		PARKER	
Address	City (no abbreviations)		State	Zip Code
11901 SANTA MONICA BLVD	LOS ANGELES		CA	90025
c. Chief Financial Officer/	First Name	Middle Name	Last Name	Suffix
	ASMITA		DEVANI	
Address	City (no abbreviations)		State	Zip Code
12629 CASWELL AVE D-1	LOS ANGELES		CA	90066

5. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL — Complete items 5a and 5b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
GREGG		BERNSTEIN	
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
4730 WOODMAN AVE # 200	SHERMAN OAKS	CA	91423

CORPORATION — Complete item 5c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) — Do not complete Item 5a or 5b

6. Common Interest Developments

☒ Check here if the corporation is an association formed to manage a common interest development under the Davis-Stirling Common Interest Development Act (California Civil Code section 4000, et seq.) or under the Commercial and Industrial Common Interest Development Act (California Civil Code section 6500, et seq.). The corporation must file a Statement by Common Interest Development Association (Form SI-CID) as required by California Civil Code sections 5405(a) and 6760(a). See Instructions.

7. The information contained herein, including in any attachments, is true and correct.

06/08/20

Gregg M. Bernstein

CFO

Date

Type or Print Name of Person Completing the Form

Title

Signature